								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective January 1, 2003								i					
								10-620-601					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER SMALL		
TOTAL CLAIMS			14			***	RA	TE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE 375.00		OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			/  minus 20=		٠	. 6		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 mir	nus 3 =	*	0	X4	X42=		OR	X84=		
MULTIP	LE DEPEN	IDENT CLAIM PE	RESENT				+140=			OR	.+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TO	TOTAL		OR	TOTAL	750		
CLAIMS AS AMENDED - PART II											OTHER	9	
-2   16   05 (Column 1) (Column 2) (Column 3)						SM	ALL	ENTITY	OR	SMALL			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO	BER DUSLY	PRESENT EXTRA	RA	_	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total	al	. 14	Minus	<del>**</del> 2	0	=	X\$	25		OR	X\$ <del>18-</del>		
AME Indi	ependent	. 12	Minus	***	3	=	X4	00		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								0=		OR	+280=		
							ADDIT	OTAL			TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)									<del></del>	•	ADDII. FEC		
m .		CLAIMS REMAINING		HIGHEST NUMBER					ADDI-			ADDI-	
AMENDMENT B		AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RA	ΓΕ	TIONAL FEE		RATE	TIONAL FEE	
Total		*	Minus	**		= '	X\$	9=		OR	X\$18=		
V FIR	ependent ST PRESE	* NTATION OF MU	Minus	ENDENT	CLAIM	-	X4	2=		OR	X84=		
1					ODAM		+14	0=		OR	+280=		
							ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colur		(Column 3)							
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA*	Œ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	al	*	Minus	á*		=	X\$	9=	, 5.5	OR	X\$18=	,	
AME Inde	ependent	±	Minus	***		=	X4:	?=			X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
The "	Highest Nun	hber Previously Pai	d For (Total or	Independe	ent) is the	highest numbe	r found in t	ne ap	propriate box	in col	umn 1.		

FORM PTO-875 (Rev. 12/02)

\*U.S. Government Printing Office: 2003 — 498-278/69151

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